



City of Monticello, Indiana

ADA Advocacy Award

Nomination Form 2014

Description/Requirements: This award is intended to recognize and affirm a business or individual within the community, who exemplifies advocacy, service, and commitment to persons with disabilities. The nominee should be a champion of persons with access and functional needs, and should illustrate such through words, actions, and deeds

Nominee's name:

Profession:

Address:

Place of Employment:

Telephone:

Write a brief explanation of how the nominee exhibits the principles embedded within the Americans with Disabilities Act. (Feel free to continue on the reverse side.)

Nominated by: _____ **Date:** _____

